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GERMANY.

Report from Berlin—Plague in Egypt and South Africa—Measures against spread of cerebro-spinal meningitis in Germany.

Consul-General Mason reports, April 29, as follows:

Plague.

Egypt.—During the week ended April 8 there were registered in Egypt 4 fresh cases of plague (and 3 deaths), of which 2 cases (2 deaths) occurred in the district of Tuh; 1 case (1 death) in the Magagha district, and 1 case in Alexandria.

During the period from April 8 to 15 there were notified 2 fresh cases of plague and 2 deaths in the district of Tuh, Province Kaliubieh.

British South Africa.—Cape Colony. During the week ended March 11 there were notified 4 fresh cases of plague in East London. During the period from the 11th to the 18th of March there were registered 2 cases of plague in East London and 1 fresh case in Port Elizabeth.

Measures against spread of cerebro-spinal meningitis.

The German health department has just issued a leaflet respecting epidemic cerebro-spinal meningitis, containing instructions for combating the disease. The disease has spread widely in Silesia this winter and spring, ending fatally in about one-third of the cases; in cases of recovery, deafness, blindness, maiming, and mental disorders have remained behind.

The regulations embodied in the leaflet are as follows:

(1) Epidemic cerebro-spinal meningitis is an infectious disease, which is caused by an invisible disease germ, the so-called *Meningococcus intracellularis*.

(2) The sickness begins suddenly, being accompanied with fever (generally ague), violent pains in the head, neck, and limbs, vomiting and unconsciousness, and a peculiar stiffness of the neck, with paralysis of individual muscles. In a number of cases death results in a few days.

(3) Infection generally takes place by means of the mucous of the nose and throat of persons suffering with the disease. Healthy persons in the vicinity of the patient, and those coming in contact with these persons, can also transmit the disease germ in the mucous of the nose and throat, and thus cause the disease to spread.

(4) Small, overcrowded, and badly ventilated rooms favor the spread of the disease.

(5) The following are the most effective protective measures:

(a) Immediate notification of each case of epidemic cerebro-spinal meningitis, and suspected cases, to the police authorities.

(b) Strict isolation of the patient, as well as those suspected to be suffering with the disease, and transportation of the patients to a suitable hospital, if proper isolation in their residence is not practicable. The patients must not be conveyed to the hospital in cabs or other public conveyances. If this, however, in individual cases can not be avoided, the respective conveyances must be disinfected afterwards in